

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-475)

SERIAL NO.

FILING DATE

10/59/227

ATTORNEY

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
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TOTAL REF.	17	←		←		←			←		←		←
TOTAL CLAIMS	20												
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TOTAL REF.		←		←		←			←		←		←
TOTAL CLAIMS													